



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Giandomenico Russo and Carlo M. Croce  
Application No.: 09/441,242 Group: 1636  
Filed: November 16, 1999 Examiner: James S. Ketter  
Confirmation No.: 4066  
For: TCL-1 GENE AND PROTEIN AND RELATED METHODS AND COMPOSITIONS

<b>CERTIFICATE OF MAILING OR TRANSMISSION</b>	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
April 20, 2006	<i>Marianne Lentini</i>
Date	Signature
MARIANNE LENTINI	
Typed or printed name of person signing certificate	

Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

- [ X ] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- [ ] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

**The claims fee has been calculated as shown below:**

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	7	MINUS	* 56	0
INDEP	6	MINUS	** 21	0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

\* not fewer than 20

\*\* not fewer than 3

## SMALL ENTITY

	RATE	ADDIT. FEE
X	\$ 25	\$
X	\$ 100	\$
+	\$ 180	\$

TOTAL= \$ 0OTHER THAN  
SMALL ENTITY

	RATE	ADDIT. FEE
X	\$ 50	\$
X	\$ 200	\$
+	\$ 360	\$

TOTAL= \$ 0**The Application Size Fee has been calculated as shown below:***(Effective for cases filed on or after December 8, 2004)*

Actual Sheets (Including current amendment)	Highest No. of Sheets Paid For (At least 100)	No. of Additional Units Required (Increments of 50 sheets)

## SMALL ENTITY

Rate	Total Amount Owed
X \$125	\$[ ]

OTHER THAN  
SMALL ENTITY

Rate	Total Amount Owed
X \$250	\$[ ]

Payment  
Sufficient for  
up to

[ ] Sheets

**Petition for Extension of Time**

[ ] Applicant hereby petitions to extend the time to respond to the [ ] dated [ ] for [ ] month(s) from [ ] to [ ]. The appropriate fee is set forth below.

[ X ] Applicants' Attorney is filing a separate Petition for Extension of Time for two months concurrently herewith.

**Please charge Deposit Account No. 08-0380 for the following fees:**

<input type="checkbox"/>	Petition for [ ] month Extension of Time	\$ _____
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input type="checkbox"/>	Other Fees:	_____
	_____	\$ _____
	_____	\$ _____
	TOTAL:	\$ <u>0</u>

**A check is enclosed in payment of the following fees:**

<input checked="" type="checkbox"/>	Petition for two-month additional Extension of Time	\$ <u>450</u>
<input type="checkbox"/>	Claims Fee	\$ _____
<input type="checkbox"/>	Application Size Fee	\$ _____
<input checked="" type="checkbox"/>	Other Fees:	_____
	Request for Continued Examination (RCE)	\$ <u>395</u>
	_____	\$ _____
	TOTAL:	\$ <u>845</u>

☒ Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this letter is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

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Dated:

4/20/2006